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Signature	<i>Susan M. Alessi</i>	Date	May 10, 2002

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 # 31,32*

Date: May 10, 2002

Please Deliver To: Examiner Larry Helms
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Facsimile No.: (703) 746-5219

Phone: (703) 306-5879

From: James S. Keddie, Ph.D., Reg. No. 48,920

Re: US Patent Application No. 09/425,075 for
 FUNCTIONALLY ASSEMBLED ANTIGEN-SPECIFIC INTACT RECOMBINANT
 ANTIBODY AND A METHOD FOR PRODUCTION THEREOF
 By: Choudary et al.
 Atty. Docket: UCAL-269

Message: Please see attached filing following this cover sheet including:

- RCE Transmittal (1 page)
- Fee Transmittal in duplicate (2 pages)
- Amendment (10 pages)
- Request for Extension of Time (1 page)
- Copy of Revocation of Power of Attorney/Power of Attorney (2 pages)

Total number of pages, including this cover sheet: 16

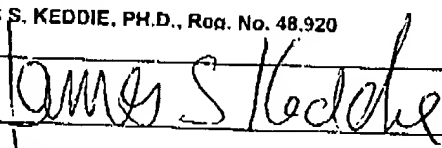
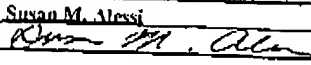
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PTO/SB/21 (08-00)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM		Application Number	
(to be used for all correspondence after initial filing)		09/425,075	
Total Number of Pages in This Submission		Filing Date	
2		October 21, 1999	
ENCLOSURES (check all that apply)		First Named Inventor	
<input type="checkbox"/> Fee Transmittal Form		CHOUDARY, PRABHAKARA V.	
<input type="checkbox"/> Fee Attached		Group Art Unit	
<input type="checkbox"/> Amendment / Reply		1642	
<input type="checkbox"/> After Final		Examiner Name	
<input type="checkbox"/> Affidavits/declaration(s)		L. HELMS	
<input type="checkbox"/> Extension of Time Request		Attorney Docket Number	
<input type="checkbox"/> Express Abandonment Request		UCAL-269	
<input type="checkbox"/> Information Disclosure Statement			
<input type="checkbox"/> Certified Copy of Priority Documents			
<input type="checkbox"/> Response to Missing Parts/Incomplete Application			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
<input type="checkbox"/> Assignment Papers (for an Application)			
<input type="checkbox"/> Drawing(s)			
<input type="checkbox"/> Licensing-related Papers			
<input type="checkbox"/> Petition			
<input type="checkbox"/> Petition to Convert to a Provisional Application			
<input checked="" type="checkbox"/> Power of Attorney, Revocation			
<input type="checkbox"/> Change of Correspondence Address			
<input type="checkbox"/> Terminal Disclaimer			
<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> CD, Number of CD(s) _____			
Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual Name	JAMES S. KEDDIE, PH.D., Reg. No. 48,920		
Signature			
Date	April 16, 2002		
CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: April 16, 2002.			
Typed or printed name	Susan M. Alessi		
Signature			
Date	April 16, 2002		

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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT		(\$)		1350.00																																																																																																																																																															
METHOD OF PAYMENT 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to: Deposit Account Number 50-0815 Deposit Account Name Bozicevic, Field & Francis LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27 2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other						Complete if Known Application Number 09/425,075 Filing Date October 21, 1999 First Named Inventor CHOUDARY, PRABHAKARA V. Examiner Name Larry Helms Group Art Unit 1642 Attorney Docket No. UCAL-269																																																																																																																																																													
2. BASIC FILING FEE <table border="1"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Small Entity Fee Code</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>201</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>106</td> <td>206</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>207</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>208</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>214</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="3">SUBTOTAL (1)</td> <td></td> </tr> </tbody> </table>						Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid	101	201	Utility filing fee		106	206	Design filing fee		107	207	Plant filing fee		108	208	Reissue filing fee		114	214	Provisional filing fee		SUBTOTAL (1)				3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	James S. Kiddle, Ph.D.	Registration No. (Attorney/Agent)	48,920
Signature	<i>James S. Kiddle</i>	Telephone	(550) 327-3400
		Date	05/10/2002

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